



## Abstract Evaluation Criteria

### Scoring guidelines for abstracts

The listings under each of the 6 criteria are designed as a guide only. Apply them only as appropriate and necessary for the abstract under review. They are not fully inclusive for all possible investigations and they all are not meant to be applied for every abstract.

Each abstract will be reviewed by at least three independent scientific reviewers according to the following six criteria: 1) background and rationale for study, 2) appropriateness of methods, 3) presentation of results, 4) conclusions and interpretations of results, 5) public health significance and 6) overall clarity of abstract.

Abstracts will be considered as candidates for either oral or author-attended poster sessions. Once an abstract is accepted, the scientific committee will determine whether it is more appropriate for oral or poster presentation.

### 1. Background and rationale for study (1-5)

- Is the public, animal, or environmental health problem or question that the study will address and its significance apparent?
- If necessary, are key antecedent data or issues presented to set the stage for the study?
- Does the author explicitly state the objective(s) of the study?
- Is the objective(s) appropriate for addressing the problem or study question?

### 2. Appropriateness of methods (1-5)

- Is the overall study design adequately described?
- Is the overall study design appropriate and efficient to address the study objectives?
- Are critical definitions clearly stated (if not obvious)? These could include, for example: case, principal exposure, vaccine failure, etc.
- Are the epidemiological/statistical methods concisely described? Authors should avoid naming software packages instead of epidemiologic or statistical procedures.
- Is the population involved stated or apparent?
- Is the data source (questionnaire, registry, surveillance data set) stated?

### 3. Presentation of results (1-5)

- Do the study results logically follow the described methods?
- Are study results summarized using appropriate quantitative/qualitative measures (e.g., number of individuals in study, major time, person, and place findings)?
- Are numerical comparisons correct and appropriate (e.g. rates for explicit or implied comparisons)?
- Are results sufficiently described and adequate data presented to allow the reader to reach a conclusion?

#### **4. Conclusions and interpretations of results (1-5)**

- Are the conclusion and interpretation based on the data presented?
- Does the conclusion/interpretation address the problem and objectives?
- Does the study appear sufficiently valid and reliable to serve as a basis for the conclusions and for taking public health action (i.e. are the results unlikely to be attributable to chance, confounding, or other potential biases)?
- Is the interpretation of the findings consistent with current scientific knowledge?
- Does the author synthesize results into a conclusion (Conclusions should not simply repeat data from the results or restate them with adjectives replacing numbers)?
- Are the conclusions justified in relation to the analysis of data completed in the study?

#### **5. Public, animal, or environmental health significance (1-5)**

- Does this study, in both topic and results, have an obvious application to improving public, animal, or environmental health?
- Does the data solve an immediate problem or build on existing knowledge (and not simply repeat what is already done with little or no effective modification)?
- Are actions/recommendations/control measures practical, and derived directly from study results?
- Are public, animal, or environmental health actions recommended, reported as undertaken, completed, or shown to be effective (e.g., initiating or enhancing prevention or other health programs; developing procedures, policies or legislation; implementing and strengthening public, animal, or environmental health surveillance systems; reducing disease incidence)?
- If the recommendations have not been implemented yet, are they likely to address the problem or health issue that led to this study?

#### **6. Overall clarity of the abstract (1-5)**

- Is the writing concise and direct, without unnecessary qualification?
- Is there a logical sequence and cohesiveness among and within abstract sections?
- Is content of each section correctly placed (i.e. results in the results section only)?
- Are appropriate terms/concepts consistently used throughout avoiding vague, ambiguous terms or jargon?
- Are instructions on word limit, abstract structure, and style adhered to?

Each of these 6 evaluation criteria will be assigned a score of from 1 to 5 points, using an approximate scale of: 5 = excellent, 4 = very good, 3 = good, 2 = fair, 1 = poor/absent. Thus, each abstract can receive a total score in the range from 6 to 30 points. Final scores will be adjusted to account for variability among reviewers.